

DEPARTMENT OF HEALTH AND SENIOR SERVICES
2003 AFFIRMATIVE ACTION PLAN
TABLE OF CONTENTS

Non-Discrimination in Employment and Provision of Services Policy	Page 03
Introduction	Page 05
Description of the Department	Page 06
Organizational Chart on June 30, 2003	Page 10
Organizational Chart after July 01, 2003	Page 11
Dissemination	Page 12
Implementation	Page 13
Recruitment	Page 15
Specific Recruiting and Advertising	Page 16
Employment and Benefits	Page 17
Special Policy	Page 19
Service Provision	Page 21
Purchasing	Page 22
Progress, Problems, and Analysis	Page 24
Workforce Analysis	Page 27
Goal Update from Previous Plan	Page 28
Under-Utilization and Goals For the Current Plan	Page 28
Statistical Analysis and Goals	Page 29
Under-Utilization by District	Page 30

Analysis of Job Area Acceptance (JAAR)	Page 34
Salary Analysis	Page 37
Glossary of Terms	Page 38
Job Groups	Page 40

NON-DISCRIMINATION IN EMPLOYMENT AND PROVISION OF SERVICES POLICY

It is the policy of the Missouri Department of Health and Senior Services to provide equal treatment in employment and provision of services to applicants, employees and clients without regard to race, color, national origin, sex, religion, age, disability or veteran status; hereafter referred to as protected category.

In accordance with the Affirmative Action Program, Governor's Executive Order 94-03, applicable federal and state laws and regulations, and the principles of affirmative action and equal employment opportunity, the Missouri Department of Health and Senior Services shall provide equal opportunity for all in recruitment, hiring, training, promotion, transfer, compensation, and all other terms and conditions of employment without regard to protected category status.

It is the policy of the Missouri Department of Health and Senior Services to assure that no person will be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination for any services because of race, color, national origin, sex, religion, age and/or disability. No facility operated by the Department of Health and Senior Services may be used to promote any discriminatory practice nor shall the Department become a party to any agreement that permits any discriminatory practice. Appropriate interpretive services will be provided as required for the visually or hearing impaired and for persons with language barriers. The Department of Health and Senior Services shall not grant, deny or revoke a license, registration or certification on the basis of race, color, national origin, sex, religion, age or disability.

The Missouri Department of Health and Senior Services' commitment to Title VI, Title VII and Title IX of the Civil Rights Act of 1964 and amendments, Sections 503 and 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, the Missouri Public Accommodations Act, and Executive Order 94-03 is hereby reaffirmed.

This policy and the Affirmative Action Plan shall be adhered to by all staff and contractors (where applicable) of the agency. Supervisory and management staff, in particular, shall assure that the intent as well as the stated requirements of the Methods of Administration are implemented. The application of this policy is the individual responsibility of all administrative and supervisory staff.

This policy shall be posted in all offices of the Missouri Department of Health and Senior Services.

Richard C. Dunn, Director
Department of Health and Senior Services

Date

Ron Cates, Chief Operating Officer
Department of Health and Senior Services

David Durbin, Deputy Director
Senior Services and Regulation

Tricia Schlechte, Deputy Director
Health and Public Health

Dr. Eric Blank, Director
State Public Health Laboratory

Mary Hoskins, Chief
Office of Personnel

Garland Land, Director
Center for Health Information
Management and Evaluation

Wm. Bryant McNally, Director
Division of Environmental Health and
Communicable Disease Prevention

Paula Nickelson, Director
Division of Community Health

Mark Reading, Director
Division of Administration

Mahree Skala, Director
Center for Local Public Health Services

Pamela Rice Walker, Director
Center for Emergency Response and
Terrorism

INTRODUCTION

The Department of Health and Senior Services' Affirmative Action Plan is designed to communicate and facilitate the commitment to the principles of equal employment opportunity, affirmative action, diversity recruitment, retention, and provision of employment opportunities to a diverse workforce. The implementation and maintenance of a diverse workforce and the provision of equitable and quality public health services is a primary goal of the Department.

An integral part of Departmental policy and philosophy is to administer hiring, transfers, promotions, training, compensation, benefits, and any other terms and conditions of employment, without regard for protected category status.

The Affirmative Action Plan emphasizes a goal-oriented approach to affirmative action. Information in a plan should include data on under-utilization of minorities and females in the workforce and set specific goals to address *only* those positions that are under-utilized. The Department's intent is to reach parity through hiring diverse applicants and promoting current employees. Setting goals for the Department can assist in reaching this point.

This Plan commits all employees of the Department of Health and Senior Services to support the Departmental policy regarding equal employment opportunity, affirmative action goals, and provision of services and contractual agreements in a nondiscriminatory manner.

This Department is also committed to the establishment and maintenance of a contractual support system that encourages and supports minority and female entrepreneurs to provide their services through contracts with the Department.

DESCRIPTION OF THE DEPARTMENT

Senate Bill 25 created the Department of Health in 1985. The bill elevated the Division of Health in the Department of Social Services to a separate cabinet level Department, to become the Department of Health. This enhanced Missouri's ability to respond to the increasing challenges of protecting the public's health. The Department is one of 16 cabinet-level agencies in state government. The State Board of Health and the Board of Senior Services act in an advisory capacity to the Department and consists of twenty-three (23) members appointed by the Governor and confirmed by the Senate. The Department continues to grow and expand to meet the needs of the public. This growth is evident with the addition of the Division of Senior Services, which was made official through Executive Order 01-02. This transfer helped to create the Department of Health and Senior Services. When the transfer became official on August 28, 2001, this transfer provided the opportunity to combine resources and services so the Department could start concentrating on ways to improve the health and quality of life for Missourians of all ages. The vision for the Department of Health and Senior Services is "healthy people living in an environment that is safe, supportive, and conducive to a healthy lifestyle."

The 2003 Plan gives a "snapshot picture" of the Department as it looked on June 30, 2003. At that time, there were four (4) centers and seven (7) divisions. Since July 01, 2003, the Department has re-organized into three (3) centers and four (4) divisions.

OFFICE OF THE DIRECTOR

The Department Director is appointed by the Governor and is the Chief Executive Officer for the Department. The Chief Operating Officer and the Deputy Directors assist the Director and act for the Director in his/her absence. The Director is the chief liaison officer of the Department for joint efforts with other governmental agencies and with private organizations that conduct or sponsor programs that relate to public health in Missouri. The Director's Office oversees the offices of: Personnel; Professional Development and Strategic Planning; Public Information; Governmental Policy and Legislation; General Counsel; Women's Health, Epidemiology; Minority Health; and the Centers of: Emergency Response and Terrorism; and Information, Management and Evaluation.

CENTER FOR EMERGENCY RESPONSE AND TERRORISM (CERT)

CERT was created in 2002 to coordinate regional and state planning for and response to public health emergencies and natural disasters, including biological, chemical, and nuclear terrorism. The center oversees the Department Situation Room (DSR) that will serve as the coordination point/command center for all DHSS' response to emergencies both natural and deliberate. The center also ensures inter-departmental coordination between the departments of Public Safety, Natural Resources, Conservation, Agriculture, Mental Health, and Social Services.

CENTER FOR HEALTH IMPROVEMENT (CHI)

CHI's purpose is to aid in the design and development of sustainable systems to define and achieve improved health. To carry out this purpose, the center's critical function is to coordinate technical assistance and resources to enable the establishment and accomplishment of effective community-based health interventions with a primary focus on interventions that address access to care and oral health. CHI oversees the Community Health Assistance Resource Team, Rural Health and Primary Care, and Oral Health programs. **Due to re-organization, this center joined with other divisions and centers to form the Division of Community Health.**

CENTER FOR HEALTH INFORMATION MANAGEMENT AND EVALUATION (CHIME)

CHIME oversees statistical support and health care assurances activities of DHSS. Based on the analysis of health statistics, this center advises the director of DHSS regarding the general health status of Missourians. Other health statistics responsibilities include monitoring the labor pool of selected health professionals in the state and monitoring the number, staffing, and utilization of hospitals and other health facilities. CHIME oversees the Bureau of Vital Records, Section of Health Statistics, and Office of Information Systems

STATE PUBLIC HEALTH LABORATORY

The State Public Health Laboratory system receives specimens for testing and examination, and is responsible for approving methods and instruments. It is also responsible for issuing permits to qualified individuals to perform tests used to enforce Missouri's law prohibiting driving while under the influence of alcohol and drugs. Testing services are available in the areas of analytical chemistry, environmental bacteriology, metabolic disease screening, clinical microbiology, serology, and virology. Testing services are available through the Chemistry Unit, Environmental Bacteriology Unit, Metabolic Disease Unit, Microbiology Unit, and Serology/Virology Unit. Branch labs are located in Springfield and Poplar Bluff, in addition to the Tuberculosis lab located in Mt. Vernon. The State Public Health Laboratory is the principle laboratory for the state, supporting investigations of suspected acts of Bioterrorism.

DIVISION OF ADMINISTRATION

The Division of Administration's mission is to provide leadership in providing quality fiscal and general support services that facilitate the Department's success in protecting and promoting quality of life for all Missourians. This is accomplished while working collaboratively with other divisions and centers to ensure: a sound system of fiscal management; a safe and functional work environment; and compliance with related laws, regulations, and policies. The Division of Administration assists and supports the Department's programs in the accomplishment of goals by providing administrative and technical services. Business support services include the Bureaus of: Grants & Contracts, Budget Services, Financial Services, and General Services.

CENTER FOR LOCAL PUBLIC HEALTH SERVICES (CLPHS)

The Center for Local Public Health Services strengthens Missouri public health by working with the local public health system to facilitate a core functions approach, develop a population-based approach to health issues, and design a model structure. This includes establishing accreditation of local public health agencies, promoting and/or developing professional standards, and assuring that emergency preparedness plans are in place. The Center also monitors the health status of communities and provides professional support to public health nurses employed within the public health system.

DIVISION OF CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION (CDPHP)

The Division of Chronic Disease Prevention and Health Promotion directs statewide programs that are designed to combat the major causes of premature death, illness, disability and medical costs in Missouri such as heart disease, cancer, stroke, diabetes, and arthritis. These programs are primarily conducted through three bureaus and one office within the division: Health Promotion, Chronic Disease Control, Cancer Control, and the Office of Surveillance, Research and Evaluation. **Due to re-organization, this division merged with other centers and divisions to form the Division of Community Health.**

DIVISION OF ENVIRONMENTAL HEALTH AND COMMUNICABLE DISEASE PREVENTION (EHCDP)

This division is the principal unit involved in the investigation of the cause, origin and method of transmission of these diseases and conditions. The interrelated services of this division focus on disease surveillance, prevention, and control. Included are specific responsibilities related to communicable diseases, immunization, tuberculosis, zoonoses, sexually transmitted diseases, AIDS, community sanitation, environmentally related health hazards, and hazardous substance control. Sections are: Environmental Public Health, Communicable Disease Prevention, and the Offices of: Surveillance; Operations and Fiscal Services. The division is integral to the Department of Health and Senior Services' emergency responses to public health emergencies and natural disasters, including biological, chemical, and nuclear terrorism.

DIVISION OF MATERNAL, CHILD AND FAMILY HEALTH (MCFH)

The mission of the Division of Maternal, Child and Family Health is to promote optimal health by providing leadership to both the public and private sectors in assessing and assuring the appropriate responses to families and communities. This division is responsible for developing policy; planning systems of care; and designing, implementing and evaluating programs to meet the health care needs of families in the state. The Division of Maternal, Child and Family Health consists of Genetics and Disabilities Prevention, Special Health Care Needs, Family Health, and Office of Planning, Evaluation and Injury Prevention. **Due to re-organization, this division merged with other centers and divisions to form the Division of Community Health.**

DIVISION OF NUTRITIONAL HEALTH & SERVICES (NHS)

The Division of Nutritional Health & Services' mission is to decrease preventable nutrition-related morbidity and mortality throughout the life cycle. The division is responsible for coordinating all nutrition-related activities within the Department, conducting nutrition-related epidemiological and surveillance activities, and providing technical guidance as needed. The division is also responsible for facilitating appropriate linkages between Department programs and programs in other state agencies that have nutrition components. The Division of Nutritional Health & Services includes the Office of Surveillance; Evaluation, and Planning; Nutrition Services and WIC, Nutrition Policy and Education, and Community Food and Nutrition Assistance. **Due to re-organization, this division merged with other centers and divisions to form the Division of Community Health.**

DIVISION OF HEALTH STANDARDS AND LICENSURE (HSL)

This division oversees the health care regulatory programs of the Department. The Director of this division supervises hospital, home health agency and child care licensure activities, state emergency medical services, nursing home regulation/licensure, and the registration of Missouri handlers of controlled substances, lead abatement licensing activities and inspection activities for several Medicare certification programs. The division consists of Emergency Medical Services, Health Facility Regulation, Narcotics & Dangerous Drugs, Home Care and Rehabilitative Standards, Family Care Safety Registry; Child Care; Lead Licensing; and the Section for Long-Term Care and Regulation. **Due to re-organization, this division merged with the Division of Senior Services to form the Division of Senior Services and Regulation.**

DIVISION OF SENIOR SERVICES (SS)

The Division of Senior Services is the central state agency charged with coordinating matters relating to the lives of Missouri's elderly and disabled adult citizens living in the home or community. Through the administration of state and federal community-based programs, the division seeks to ensure that residents remain independent and safe in their homes and communities. The division is comprised of: Section for Home and Community Services that administers programs designed to allow individuals to remain in their homes with the assistance of various support services; Bureau of Senior Programs that has the responsibility for ensuring the effective and efficient management of state and local activities authorized through the Older Americans Act and supplemented through state funding; Bureau of Quality Assurance that is responsible for program compliance for the in-home and counseling programs. The bureau ensures that agencies maintain appropriate operating procedures and billing practices and on-site monitoring visits provide technical assistance to provider agencies as necessary to ensure quality care; the Policy/LTags Unit which is responsible for the interpretation, development, implementation and maintenance of Missouri policies and regulations, and the reimbursement of providers delivering care authorized by the Home and Communities staff. **Due to re-organization, this division merged with the Division of Health Standards and Licensure to form the Division of Senior Service and Regulation.**

Organization Chart on June 30, 2003

Organizational Chart after July 01, 2003

DISSEMINATION

The Department's Equal Employment Opportunity Policy is included in the Department's Administrative Manual and is available to all employees on the department's intranet.

Internally, the Affirmative Action Plan is available to all employees by requesting a copy from their supervisor or manager, or by requesting a copy from the Office of Personnel, or by locating it on the Department's Intranet.

Externally, the Plan is made available to all federal, state, and local entities at their request. The Plan is further provided to all recruitment sources and to any applicant or any other interested party by request. The department's official stationery also states that the Department of Health and Senior Services is an Equal Opportunity/Affirmative Action employer.

All agencies, contractors, subcontractors and vendors receiving funds from or through the Department of Health and Senior Services or providing services to and for the Department of Health and Senior Services shall be informed of the Department's policy and their responsibility to comply with all applicable federal and state laws, regulations, and executive orders pertaining to equal employment opportunity and nondiscrimination in provision of services. They will likewise be required to post the Department of Health and Senior Services' policy statement in their offices. This will be done through contract language, training when made available, contact through correspondence or in-person, or through civil rights monitoring activities.

IMPLEMENTATION

The following Department officials, management, and supervisory personnel have authority and responsibility to implement the Department of Health and Senior Services' Affirmative Action Plan.

DIRECTOR, DEPARTMENT OF HEALTH AND SENIOR SERVICES

The Director of the Department holds ultimate responsibility for the Department's compliance with federal and state laws, regulations, and executive orders relating to equal employment opportunity and for the Departmental policy statements and the Affirmative Action Plan. The Director has authority and responsibility for assuring that management and supervisory personnel carry out the provisions of the Equal Employment Opportunity Policy and the Affirmative Action Plan.

CHIEF OPERATING OFFICER, DEPARTMENT OF HEALTH AND SENIOR SERVICES

The Chief Operating Officer is the Department Director's designee for implementation of all aspects of the Plan. The COO carries out these responsibilities through the Deputy Department Directors, Division Directors, and their administrative subordinates.

DEPUTY DEPARTMENT DIRECTOR for HEALTH AND PUBLIC HEALTH *and*

DEPUTY DEPARTMENT DIRECTOR for SENIOR SERVICES AND REGULATION

The Deputy Directors act for the Director in the Director's absence and assist in assuring that management and supervisory personnel comply with the provisions of the Affirmative Action Plan. The Deputy Directors directly supervise the divisions and centers, assist the Director in making crucial leadership decisions, and are responsible for setting a positive leadership tone. The Deputy Director of Health and Public Health oversees the following divisions and centers: EHCDP, MCFH, CLPHS, NHS, and CDPHP. The Deputy Director of Senior Services and Regulation oversees the Division of Senior Services, Division of Health Standards and Licensure, the Central Registry Unit, Ombudsman Program, and the Missouri Health Facilities Review Committee.

CHIEF, OFFICE OF PERSONNEL

The Chief, Office of Personnel, is responsible for ensuring all personnel actions of the Department are administered without regard to protected category status and in accordance with Executive Order 112465, Governor's Executive Order 94-03, and the state merit regulations. The Chief further assists in setting a leadership tone for all management in support of affirmative action and equal employment principles. The Chief provides supervision of the Human Relations Officer and all personnel functions.

HUMAN RELATIONS OFFICER III

The Human Relations Officer III is the Department's Affirmative Action Officer and assists in the administration and implementation of the Affirmative Action Plan. The HRO develops and revises the Affirmative Action Plan. The Human Relations Officer also investigates complaints of discrimination, unlawful employment practices, and sexual harassment. This office also monitors the grievance process and provides mediation services when appropriate. This office oversees contract compliance and its administration and enforcement of Title VI of the Civil Rights Act, the Americans with Disabilities Act, Sections 503 and 504 of the Rehabilitation Act of 1974, and all other related laws dealing with equality in providing services. The HRO also provides training in the prevention of sexual harassment within the workplace.

DIVISION / CENTER / LAB DIRECTORS

Each division/center director acts as the Appointing Authority for their division/center and is responsible for ensuring the provisions of the Equal Employment Opportunity Policy and the Affirmative Action Plan are implemented and maintained within his/her division/center. Authority and responsibility include having a thorough knowledge of the Affirmative Action Plan, making a concerted effort to achieve the goals set forth in the Plan, and assuring equal employment opportunity.

MANAGERS AND SUPERVISORS

The leader of each organizational unit is responsible for carrying out the provisions of the Affirmative Action Plan. Authority and responsibility include having a thorough knowledge of the Plan, making a visible and proactive effort to achieve the goals set forth in the Plan, and taking appropriate initiative to provide job opportunities for all eligible applicants. Managers and supervisors are responsible for providing equal treatment in all terms, conditions, and privileges of employment.

RECRUITMENT

Due to hiring restrictions and layoffs of personnel in 2003, the Department lost its recruitment Specialist; therefore, recruitment was very limited. Recruitment has now become a shared responsibility between the Office of Personnel and the units who are hiring.

FOCUSED RECRUITMENT

Recruitment is the process through which the Department conveys news of job openings to the community and, through personal contacts and the use of advocate and community groups, encourages qualified individuals to apply. Developing a diverse pool of applicants is an important step in bringing historically under-utilized individuals into the Department's labor force. Focused recruitment is a technique intended to assure that the applicant pool for positions within the Department includes a greater number of under-represented individuals to compete in the selection process. Due to budget restrictions, recruitment is now limited and focuses mainly on reporting job opportunities through the Internet.

PUBLIC OUTREACH

Public outreach consists of activities designed to present upcoming Department opportunities to the community. Public outreach provides the Department the opportunity to build working relationships with target communities throughout the state and identify where qualified diverse applicants are reached. All recruitment activities are contingent on available funding and were, therefore, limited in scope.

The following categories have been used in the past (when budget allowed) in establishing and maintaining a flow of historically under-utilized applicants:

- community action organizations;
- minority and women's advocacy and professional groups;
- college and university internship programs;
- university and community college groups;
- ethnic professional associations;
- university and community college career counseling centers;
- advocacy groups for the employment of the disabled; and
- career planning and placement offices located on college and university campuses.

When using newspaper advertisements, the Department places ads in community interest and minority papers, particularly in the metropolitan areas. These actions are also based on budget.

As budget permits, the Department participates in campus career days, job fairs, and similar programs to provide general job information for targeted group members. Campuses with significant under-utilized populations have been specifically targeted for career fair participation.

SPECIFIC RECRUITING

The following groups and organizations have served as sources of recruitment for the Department of Health and Senior Services. Many are especially helpful in encouraging women and members of minority groups to submit applications to the Department.

- Accredited schools of public health
- All state departments
- Columbia College
- Central Missouri State University
- Harris-Stowe State College
- Historically Black Colleges and Universities
- Lincoln University
- Nichols Career Center
- Truman State University (formally Northeast Missouri State University)
- Northwest Missouri State University
- Office of Administration, Division of Personnel, EEO Officer
- Office of Minority Health Coalition
- St. Louis University
- Southeast Missouri State University
- Southwest Missouri State University
- University of Missouri – All Campuses
- Webster University
- William Woods University

EMPLOYMENT AND BENEFITS

SELECTION

The Department is a Merit System agency. The majority of vacancies are filled through the use of the Merit System selection process. The Division of Personnel, Office of Administration, administers this process. Once an individual is deemed eligible through the merit process, the selection procedure may consist of a personal interview, an evaluation of education and experience, and past job performance. If other selection procedures are used, such as typing tests or other performance tests, these require prior approval by the Office of Personnel.

All selection procedures must be job-related and conducted in such a manner that applicants are evaluated on the same criteria. Managers and supervisors are encouraged to select individuals so as to build a diverse workforce. All individuals selected must be qualified and eligible through the Merit System guidelines.

After the completion of the selection process, documentation is submitted to the Office of Personnel reflecting the individual selection.

PROMOTIONS

It is the policy of the Department that promotions are made on the basis of qualifications. It is against Departmental policy to deny or award promotion or advancement based solely on protected category status.

TRANSFERS

Transfers within the Department of Health and Senior Services are granted without regard to protected category status. Employees may request transfers by completing the appropriate form and sending it to the Division of Personnel, Office of Administration.

LAYOFFS

Layoffs have been necessary in 2003 to meet budgetary goals, and are conducted in accordance with the Merit System rules and regulations. Layoffs shall not be used to affect employees on the basis of protected category status.

DISCIPLINE

Decisions to discipline an employee are made on the basis of the employee's inability to perform the duties of the position or failure to comply with Department/state policies, procedures, rules and regulations. No employee is disciplined on the basis of protected category status.

TRAINING

The Department provides training and professional development programs to help employees achieve and maintain a high level of work performance and to enhance opportunities for career growth. Training related to improving and enhancing management and supervisory skills is required for all managers and supervisors according to DHSS training policy (9.2). Leadership development opportunities are also available through the department. New employee orientation is also required for all new employees. Other workshops and training programs are available within the department to meet specific needs as identified by department management. DHSS also provides many programs via distance learning methods in order to make learning more easily accessible to all staff and customers of the department.

Training is available and encouraged for all employees regardless of protected category status.

PERFORMANCE APPRAISALS

Performance appraisals are given to all original and regular Departmental employees governed by the provisions of the Merit System. Detailed performance components and expectations are designed for each position. These components are shared with employees so that job expectations are clearly outlined. Ratings are in increments of six (6) to 12 months with special appraisals conducted on occasions where performance warrants.

COMPENSATION/CLASSIFICATION

Appointing Authorities in consult with the Office of Personnel, ensures employees are not assigned to classifications on the basis of protected category status. Recommendations for positioning classes in the pay plan are based on the relative worth of the work performed. Salary is based on qualifications of the employee in the position.

SPECIAL POLICY

ACCOMODATIONS FOR EMPLOYEES WITH PERMANENT AND TEMPORARY DISABILITIES

The Department is committed to providing assistance and support to the extent practicable to employees who have disabilities as defined by the Americans with Disabilities Act. This policy also addresses temporary disabilities. Administrative Policy 3.3 defines the Department's position on this issue. Employees shall not be discriminated or retaliated against for exercising their rights under this policy.

SEXUAL HARASSMENT

It is the policy of the Department to provide all employees with a work environment free from any form of discrimination including sexual harassment. The Department regards acts of sexual harassment as misconduct. Unlawful sex discrimination affects males and females, employees, and clients. The Department will take prompt and appropriate action when harassment is reported or discovered. The Department has an established policy and procedure to provide employees with a means for reporting these problems. New employees are given a copy of the sexual harassment policy when they first appear for work, and must sign that they received the policy.

The Department's policy relative to sexual harassment is available in the Administrative Manual, Chapter 12, Section 12.3. All supervisors are required to attend an internal training session covering the prevention of sexual harassment. This training is also provided to all employees and at New Employee Orientation. The Department's Human Relations Officer provides this training.

MEDIATION SERVICES

The Department offers mediation services. These services are available when conflict in the workplace reaches the level that normal work process is interrupted. The Department's Human Relations Officer is available for the mediation; but in cases of conflict of interest, an outside mediator assists in mediating the conflict. Managers and supervisors are encouraged to utilize mediation services to resolve conflict. The Human Relations Officer or Chief, Office of Personnel, should be contacted for information relating to these services or to schedule mediation.

DIVERSITY TRAINING

The Department conducts diversity training that is provided by the Missouri Commission on Human Rights. This training is required for all supervisors and managers.

COMPLAINT AND GRIEVANCE SYSTEM

Internal Discrimination Complaints

The Department of Health and Senior Services has a comprehensive process for resolving complaints of discrimination, unlawful employment activities (including sexual harassment), and inappropriate employment activities. Any applicant or employee who perceives he/she has experienced discrimination because of protected category status may utilize this procedure without fear of harassment, coercion, intimidation, or retaliation.

An employee or applicant may file a written complaint alleging discrimination or unlawful employment practice(s) with the Human Relations Officer and/or within their supervisory chain. Retaliation for filing or participating in a complaint of discrimination is forbidden.

The Human Relations Officer is available to counsel employees of the Department, as needed, should they believe they have been subjected to discriminatory treatment.

Grievance Procedure

The Department of Health and Senior Services maintains a grievance system to resolve work-related incidents or events that have a negative impact on work. The grievance procedure includes an informal process for employees prior to filing a formal grievance. The grievance procedure is available to Department employees without regard to protected category status.

Departmental policy prohibits retaliation or discrimination because of the use of the grievance procedure or because the employee has testified, assisted, or participated in any manner in an investigation, hearing, or other proceeding in the grievance procedure.

These policies are available in the Department's Administrative Manual, Procedures Chapter 12, Sections 12.1 and 12.6, which are on the department's intranet.

SERVICE PROVISION

PROVISION OF SERVICES

No person shall be denied receipt of any service or benefit provided by the Department of Health and Senior Services solely on the basis of race, color, national origin, sex, religion, age, and/or disability, hereinafter referred to as “protected category” status. The Department will not become party to any agreement that permits any discriminatory practice. All agencies funded, in part or in whole with state or federal revenue provided through the Department of Health and Senior Services, will provide services without regard to protected category status. Appropriate interpretive services will be provided as required for the visually or hearing impaired and for persons with language barriers, which is addressed in the contract language. The Department does not grant, deny, or revoke a license on the basis of protected category status.

CONTRACT COMPLIANCE

The Department commits to enforce Title VI of the Civil Rights Act of 1964 and amendments, Sections 503 and 504 of the Rehabilitation Act of 1973, Missouri Public Accommodation Act and Executive Order 94-03 and the Americans with Disabilities Act of 1990. The Director assures that all laws, acts, and orders prohibiting unlawful discrimination in provision of services will be enforced.

The Department has established and implemented a State Plan for Methods of Administration pursuant to Title VI, Civil Rights Act of 1964; Section 504, Rehabilitation Act of 1973; Age Discrimination Act of 1975; and Title IX, Education Amendments of 1972; and promulgated a rule which is included in the Code of State Regulations. This rule details the administrative practices of the Department relative to compliance with all federal and state laws and regulations mandating nondiscrimination in the provision of services.

The Department shall make no policy or regulation that would result in unlawful discrimination against applicants or for recipients of services in any program administered by the Department. No employee or agent of the Department may take any action on the basis of that person's affected group status. All units within the Department of Health and Senior Services shall maintain an appropriate system to provide for communication with the visually and hearing impaired and non-English speaking applicants or recipients. The Department is currently utilizing a foreign language interpretation service to assist with departmental contact with people of limited English speaking proficiency. This service is being implemented in order to make access to Departmental services more reachable for this portion of the population.

The Department will plan to include the telephone numbers for RELAY MISSOURI (a toll free telephone service for the hearing and speech impaired) in its official letterhead. The font for the footer (which contains the EEO/AA statement and the non-discrimination in the provision of services statement) has already been enlarged to make it easier to read.

PURCHASING

AGENCY TRAINING

The Missouri Department of Health and Senior Services continues to develop its employees through seminars and internal and external training programs. Procurement Unit staff attend seminars and training sessions provided by the Office of Administration, Division of Purchasing and Materials Management and use this information to develop training sessions within the Department for key staff involved in the procurement process.

Procurement staff meet with the Chief Operating Officer and division directors, when necessary, to identify resources available to the Department regarding Minority and Women Business Enterprises (M/WBE) and how those entities affect the statewide and agency contracts. The Department recognizes the importance of these meetings and will continue them, as needed, in order to provide division and program staff information in developing minority business partners. MBE and WBE issues are addressed in standard language used in all bids and proposals. The Department will continue to encourage all programs to include this language if there is a possibility of subcontracting, unless the bid is over \$100,000.00, then this language is mandatory.

With budgetary issues in the forefront of all purchases, the Department is extremely watchful and attentive as to money spent. All efforts are made to ensure that money is spent efficiently and for the purpose of serving the people of Missouri.

The Department will continue to increase utilization of M/WBE businesses for small purchases through awareness. Different ways in increasing this awareness may be done through trainings, public meetings, seminars, informational emails, memos, and posted website information.

VENDOR TRAINING

The Department will continue to provide information to our business partners regarding minority subcontractor participation. Department staff/employees have always made an effort to work with these contractors to identify possible minority subcontractors and assist in developing strategies to enable the contractor to achieve the MBE goals. Department staff will continue to assist the contractor in completing the MBE participation reporting requirements in our contracts.

RECRUITMENT

Recruitment and referral for vendor registration and participation is an ongoing activity within the Department of Health and Senior Services. In cooperation with the Office of Administration, Vendor Registration Unit, and Office of Minority Purchasing, assistance is provided to potential minority vendors in accessing information regarding the vendor registration process. Any information obtained through minority contacts made at the Department level is entered into a Minority Vendor database, a copy of any literature is retained at the Department's Procurement

Unit and a copy is forwarded to the State Minority Vendor Registration Program. The Department of Health and Senior Services utilizes other external sources to obtain qualified minority bidders. These include referrals from State Purchasing Buyers and referral from other state agencies.

Program units within the Department are informed through contract language to seek minority health care providers, commodity suppliers and other M/WBE business partners when contracting for goods or services.

The Department participates in Minority Business Enterprise events (as budget allows) such as the Black Caucus Conference, the National Institute of Governmental Purchasers Regional Conference & Vendor Exposition, and local MBE vendor presentations. The Department has also actively participated in a statewide advertising campaign in minority publications, but this activity has not been utilized as it has in the past due to budget constraints. When budget allows, the Department's Request for Proposals and Invitation for Bids are advertised in newspapers across the state. Bids are continually made available to prospective minority and women vendors through the Department's Internet home page.

PROCEDURES

The Department of Health and Senior Services' Request for Proposal and Invitation for Bid general contractual language has been revised to allow for Vendor Minority Business Enterprise certification. Additional forms are attached to these documents to track "Good Faith Effort" to be made by contractors to partner with minority subcontractors in the provision of contract requirements. "Documentation of Minority Participation" forms provide reporting mechanism for contractors to report any minority subcontracting activity achieved during the contracting period.

MONITORING

The Department of Health and Senior Services constantly updates its contract databases to reflect any minority participation through subcontracts and acts to identify any current vendors that should be classified as M/WBEs. The Department updated its contract language to require vendors to report M/WBE status and any minority subcontracting activity associated with their current contract. Contract monitoring can provide follow-up activities ensuring documentation of this activity. The Department of Health and Senior Services also contracts through participation agreements for various services.

PROGRESS, PROBLEMS, AND ANALYSIS

The Missouri Department of Health and Senior Services represents citizens of the State of Missouri. The Department of Health and Senior Services is a responsible and responsive organization of inspired employees committed to continuous improvement in the health status of our population through partnerships with local public health agencies, public and private sector entities and Missouri citizens. The mission statement of the Department is to “protect and promote quality of life and health for all Missourians by developing and implementing programs that provide: information and education, effective regulation and oversight, quality services, and surveillance of diseases and conditions. The Department uses strategic leadership and partnership while promoting community participation in programs and systems in order to accomplish outcomes and objectives.”

In order to meet this responsibility the Department must make use of all resources, both internal and external. The Department must draw on the diversity of its employees, and recruit from the diversity that exists within the applicant pool. The utilization of diversity in the development, implementation and administration of Departmental programs and the policy that administers those programs is essential. It is important to the Department that its employees, while they feel a membership in the Department team, be diverse. This diversity is extended to all aspects of diversity – those of race, color, sex, age, religion, disability, and those of creativity in thought process, ability and educational status. It is the Department of Health and Senior Services’ intent to create a diverse team of employees that is capable to meet the needs of the changing health environment. Achieving and maintaining diversity is a business necessity for the Department of Health and Senior Services. DHSS recognizes that utilizing the Affirmative Action Plan is one way to achieve this necessity. In 2003, the Department conducted a department-wide survey in order to determine where DHSS has strengths and where it needs to improve. The “Survey of Organizational Excellence” was conducted with the University of Missouri-Columbia through the University of Texas at Austin. One of the Group Dimensions that was surveyed was the Work Group and one of the key issues assessed was “diversity”. The survey had 2,172 surveys distributed with 1,716 returned for a response rate of 81% (which is considered high). Of the employees responding, 89% were white, 6% were African-American, 1% were Hispanic-American, 2% were Asian-American, and 2% were Multiracial/Other. Also, of the employees responding, 76% were female and 24% were male. In the survey, scores above 300 suggested that employees perceived the issue more positively than negatively. The issue of diversity scored 328.

Every citizen in the State of Missouri and many citizens in the United States are affected by the services provided by employees of the Missouri Department of Health and Senior Services. With the ever-increasing diversity of the client who receives the services offered by the Department of Health and Senior Services, DHSS recognizes the need to increase the diversity of its employees.

It is the intent of the Department and of this Plan to assist in the selection of a diverse and qualified group of employees to serve the public. Examples of the specialty programs that the Department administers include STD/HIV Prevention, Immunization, Tuberculosis, Injury Control, Disabilities Prevention, Family Health, Child Care and Nutrition Programs, Child Care

Safety and Licensure, Special Health Care Needs, Cancer Control, Home and Community Services, and Long-Term Care Regulation. To make sure that these specialized programs are accessible to all, the Department will include the telephone numbers for RELAY MISSOURI (a telephone service for the hearing and speech impaired) in its official letterhead. The font for the letterhead's footer (that contains the EEO/AA statement and the non-discrimination in the provision of services statement) has already been enlarged to make it easier to read.

The Department does not utilize the Affirmative Action Plan to discriminate but instead utilizes the Plan as a guide in assisting in the selection of qualified individuals. The Department has always attempted to recruit and maintain diversity, but has also had continual difficulty attracting and maintaining that diverse workforce. Hopefully, through diversity training and increasing diversity awareness, the Department can maintain its diverse employee base. Diversity training is a requirement for all supervisors and managers, but also available for all other employees.

The Department does not require managers to select minorities or females in specific positions. The Department encourages the selection of minorities and/or females in positions where under-utilization is reflected. Awareness of the Affirmative Action Plan and any underutilized group is kept in the light by asking the question "Is this class an under-utilized area in the AA plan for this division and location? Would additional assistance from the Office of Personnel in recruitment to increase the diversity of the applicant pool be beneficial?" on the Department's Request to Fill form. When a position is open and the hiring process begins, this form is filled out by managers/administrators and that one question helps to keep the Plan in their thoughts. The Department allows race and/or sex to be utilized under these circumstances only as one criterion. The applicant must be qualified for the position and must be able to carry out all functions of the position. The Department understands that the Affirmative Action Plan exists to address historically under-utilized individuals of which females and people of color are foremost. The Department further encourages the understanding that diversity is not limited to race and sex, but includes age, disability, veterans status, religion, urban/rural origin, and many other issues.

As the Department's recruitment efforts continue on a smaller scale due to budget restraints, the retention of employees in under-utilized areas still remains an important issue. Through the "Survey of Organizational Excellence" mentioned earlier, "Employee Retention" was another issue assessed. According to the survey, "The percent of employees that see themselves working for your organization in two years is a good indicator of how well your organization is doing at retaining its employees." 82% of the responding employees reported they would be working for DHSS in 2 years. Even with this response, the Department continues to explore opportunities to address the issue of under-utilization, and uses methods such as diversity training for employees and offering similar training for non-employees (interns, volunteers, etc). This is evident in the Program for Dietetic Interns (PDI). The program started in 1999 to provide training in competency skills required in dietetics for public health nutritionists and dietetic graduates with a strong focus on community and public health nutrition. The PDI has graduated three classes of dietetic interns and has recently received accreditation from the American Dietetic Association, Commission on Accreditation for Dietetics Education. The interns are given Departmental training in Civil Rights, Diversity, ADA issues, and Prevention of Sexual Harassment. After receiving the results of the survey, the Department believes that it must now make strategic

decisions for the organization. The Department must decide on how to use the information from the survey to improve upon itself and to strengthen the working relationships with clients and customers and develop a stronger organization for the future.

The Department commits itself to continue its efforts to send employees to trainings such as the Leadership Preparedness Institute's "Cultural Competence for Leaders in Public Health" conference, as it did in October 2002. This training included topics such as: Dimensions in Diversity, Definition of Cultural Competence, The Importance of Cultural Competence, Cross Cultural Communication, Cultural Assumptions and How They Impact Public Health, Cultural Competency and Preparedness, and Cultural Competence Action Plan. It is through events such as this one, that the Department promotes diversity and proves that diversity in the work force is a business necessity. Training is based on available funds, but even with limited funds, the Department plans to be a sponsor for Missouri's First "Show Me" Summit on Aging and Health in 2004. This summit will focus on many topics specific to seniors and the aging population of all cultures, and offers such seminar classes as "Recruitment, Retention, and Motivation Strategies for Volunteer Programs" and "Delivering Culturally and Linguistically Sensitive Services to the Diverse Populations of New Americans."

Because promotion is utilized often within the Department, the Department acknowledges that the successful recruitment and maintenance of diversity in entry-level positions is necessary to provide an adequate applicant pool for upper-level positions. The Department tracks monthly personnel actions on a "Monthly Personnel Report" (which includes new hires, terminations, promotions, transfers, etc.) by race and gender. A method to track promotions by "feeder groups" has not been developed. The Department will attempt to determine how to track this factor for future use since it will be required in future Plans.

An area that has not been thoroughly addressed since the last Plan is devising an easy method by which to monitor and evaluate the success of managers in achieving EEO/AA goals. A manual review of the "Monthly Personnel Reports" and "Request to Fill" forms can be done to get this information, but no database has been established to collect it.

WORKFORCE ANALYSIS

The workforce analysis section is prepared for the Department of Health and Senior Services by using data generated by the Office of Administration, Office of Equal Employment Opportunity.

The Missouri Department of Health and Senior Services employed 1,911 (full time) employees statewide, as of 30 June 2003. Total males make up 23.97% and females 76.03%. White males (W/M) account for 21.82% of the workforce; black males (B/M), 1.57% and other minority males (O/M) make up .58%. White females (W/F) account for 68.66%; black females (B/F), 6.07%; and other minority females (O/F) make up 1.31%.

Department of Health and Senior Services Breakdown as of June 30, 2003

Male.....	23.97%
Female.....	76.03%

Males

White.....	21.82%
Black.....	01.57%
Other Minorities.....	00.58%

Females

White.....	68.66%
Black.....	06.07%
Other Minorities.....	01.31%

TOTAL EMPLOYEES 1,911

GOAL UPDATE FROM THE PREVIOUS PLAN

In comparing the 2002 Affirmative Action Plan goals with the 2003 Plan goals, some under-utilized goals were met or reduced.

In the Eastern Region, the goal for Group 201 was reduced by one (1) black male and three (3) white females. The goal for Group 601 was reduced by fifteen (15) white females.

The Southwestern Region met its goal in Group 201 of one (1) black male.

In the Northwestern Region, Group 204 met its goal of five (5) white females and Group 301 met its goal of one (1) white female. Groups 601 and 602 each reduced its goals by one. Group 601 reduced its goal of black females and Group 602 reduced its goal of white females.

In the Northeastern Region there were no reported underutilized groups. The region met its goal in Group 201 of four white females.

In the Central Region, job Group 201 met its goals of five (5) white females and reduced by one (1) its goal for black males. Group 203 met its goal of one (1) other minority female. Group 204 reduced its goal for black males by one (1). Group 209 reduced its goal for other minority males by one (1). Group 601 met its goal for black males and reduced its goal for white females by one hundred seventy (170). Job Group 602 met its goal for black females.

UNDER-UTILIZATION AND GOALS FOR THE CURRENT PLAN

The following represents specific under-utilization and the goals for these under-utilized areas. The Department commits to work diligently to continuously improve the commitment to diversity over the next year. The Department commits to continue efforts to recruit and maintain diversity once parity is reached.

Goals are just that – goals. The Department strives to reach its goals through fair hiring practices by employing Affirmative Action principles. Affirmative action represents a desire and commitment from the Department to attract and maintain a diverse workforce capable of delivering services and representing citizens in a diverse population.

STATISTICAL ANALYSIS AND GOALS

The Division of Data Processing and Telecommunications, Office of Administration provides the statistics necessary to compute the under-utilization and goals. The job group and workforce analysis for the Department of Health and Senior Services was computed as of June 30, 2003. **Data from these reports and the 1990 Labor Market Information are utilized in this plan. 1990 census information was utilized due to the fact that 2000 census information would not be available.**

A 2-factor utilization form was completed for each job group in each geographical area with ten (10) or more employees. The results from this process are intended to reflect an “outside look” and “inside look” of the Department of Health and Senior Services’ employees and recruitment pools. All state agencies were required to submit plans according to this method.

The two (2) factors for people of color and females are as follows:

Factor 1/Recruitment Area: This is a factor that is looked at in determining the percentage of minorities or women with requisite skills in the reasonable recruitment area. The “reasonable recruitment area” is defined as the geographical area from which the employer usually seeks or reasonably could seek workers to fill the positions in question. This gives a person an “outside look” at our department. This factor looks at whether job recruitment is done on a nationwide level, statewide level, or local level

Factor 2/Promotion: This factor represents the individuals, including minorities and females, in jobs from which the Department can reasonably anticipate promotion or from which a promotional path is in existence and is easily recognized and readily used. This gives a person an “inside look” at our department.

The Department did not track employees’ ability to be promoted from within the Department; therefore, this factor could not be used in the analysis. This will be an item that will need to be addressed in the coming year, since its use will be mandatory in future Plans.

NOTE: A 100% factor weight was given to Factor 1. Each job category was determined to have had its recruitment solely from the local area, a statewide area, or nationwide area; and a 100% factor weight was then given to that area. Because of this, hiring goals and determinations of under-utilization represented in this analysis may not be accurately represented.

NOTE: All “goals” are hiring goals should vacancies exist.

EASTERN REGION

(Includes St. Louis City and the counties of: Franklin, Jefferson, St. Charles, and St. Louis.)

The Eastern District Health Office is located in St. Louis. The DHSS offices throughout this region provide services in child care safety and licensure, maternal and child health, environmental, communicable disease, STD/HIV prevention and care coordination, immunization, tuberculosis control, emergency medical services, narcotics and dangerous drugs, nutrition, nutritional health services, special health care needs, and home and community services.

The under-utilized areas are:

104 (other manager) reflects under-utilization of white females with a goal of one (1).

201 (social sciences) reflects under-utilization of black males and white females with the goals of seven (7) and thirty-two (32) respectively.

204 (other professionals) reflects under-utilization of black males with a goal of three (3).

205 (medical/health related) reflects under-utilization of other minority males with a goal of two (2).

601 (clerical support/keyboard) reflects under-utilization in white females with a goal of eighteen (18).

602 (clerical support/non-keyboard) reflects under-utilization in white females with a goal of three (3).

SOUTHEASTERN REGION

(Includes the counties of: St. Francois, Ste. Genevieve, Iron, Madison, Perry, Reynolds, Wayne Bollinger, Cape Girardeau, Stoddard, Scott, Mississippi, New Madrid, Pemiscott, Dunklin, Butler, Carter, Ripley, Oregon, Howell, Shannon, Texas, Wright, Douglas, Ozark.)

The Southeastern District Health Office is located in Poplar Bluff. The region’s offices provide services in environmental, communicable disease, immunization, STD/HIV prevention and service coordination, laboratory services, emergency medical services, narcotics and dangerous drugs, chronic disease prevention, nutrition, nutritional health services, maternal and child health, child care safety and licensure, special health care needs, and chronic disease prevention and health promotion.

The under-utilized groups are:

201 (social sciences) reflected under-utilization of white females with the goal of five (5) and other females with a goal of one (1).

205 (medical/health related) reflects an under-utilization of other minority females with a goal of three (3).

SOUTHWESTERN REGION

(Includes the counties of: Bates, Henry, Benton, Vernon, St. Clair, Hickory, Barton, Cedar, Polk, Dallas, Jasper, Dade, Lawrence, Greene, Webster, Newton, McDonald, Barry, Stone, Taney, and Christian.)

The Southwestern District Health Office is located in Springfield. Services are provided in areas such as environmental health and epidemiology, communicable diseases, STD/HIV prevention and care, emergency medical services, tuberculosis, narcotics and dangerous drugs, nutritional health services, special health care needs, child care safety and licensure, lab services, and maternal and child health.

The under-utilization areas are:

104 (other manager) reflects under-utilization of white females with a goal of two (2).

201 (social sciences) reflects under-utilization of white females with a goal of six (6).

301 (Health—which includes Emergency Medical Services Technician I and Medical Laboratory Technician II) reflects an under-utilization of white females. The hiring goal is two (2).

NORTHWESTERN REGION

(Includes the counties of: Atchison, Nodaway, Worth, Harrison, Holt, Andrew, Gentry, DeKalb, Daviess, Buchanan, Clinton, Caldwell, Platte, Clay, Ray, Carroll, Jackson, Cass, Johnson, and Lafayette.)

The Northwestern District Health Office is located in Independence. This region provides services in environmental, communicable disease, immunization, emergency medical services, nutrition, WIC, STD/HIV prevention and services coordination, narcotics and dangerous drugs, special health care needs, child care safety and licensure, and maternal and child health.

The under-utilization areas are:

201(social sciences) shows under-utilization of black males, other minority males, and black females. Goals are three (3), one (1), and six (6) respectively.

204 (other professionals, which includes Child Care Facility Specialist II & III, Nutritionist I & III, Environmental Public Health Specialist II & III and Investigator II) reflects an under-utilization of black males, black females, and other minority females with goals of two (2), two (2) and four (4) respectively.

205 (medical/health related) reflects under-utilization of other minority males with a goal of two (2), black females with a goal of one (1), other minority females with a goal of one (1).

601 (clerical support/keyboard) shows under-utilization of black females with a goal of one (1).

602 (clerical support/non-keyboard) shows under-utilization of white females with a goal of two (2).

NORTHEASTERN REGION

(Includes the counties of: Mercer, Putnam, Schuyler, Scotland, Clark, Grundy, Sullivan, Adair, Knox, Lewis, Livingston, Linn, Macon, Shelby, Marion, Chariton, Randolph, Saline, Monroe, Ralls, and Pike.)

The Northeastern District Health Office is located in Macon. This region provides services for the citizens of Missouri in the areas of STD/HIV care and prevention, nutritional health services, communicable diseases, immunization, dental health, special health care needs, and child care safety and licensure.

There is no under-utilization in this region.

CENTRAL REGION

(Includes the counties of: Pettis, Howard, Cooper, Boone, Audrain, Montgomery, Lincoln, Callaway, Morgan, Moniteau, Osage, Gasconade, Camden, Miller, Marie, Laclede, Pulaski, Phelps, Dent, Crawford, Washington, Warren, and Cole.)

Cole County is where Departmental administration is located. This centralized location provides the management and coordination of all functions of the Department. The services of all outstate locations are coordinated from this location.

The State Public Health Laboratory, Senior Rx program, and the Certificate of Need program are also located in Cole County.

The under-utilization in this region consists of:

101 (Officials and Administrators) reflected under-utilization in black females with a goal of two (2).

103 (manager/specialized training) shows under-utilization of black females with a goal of one (1).

104 (other manager) reflects under-utilization of black males with a goal of three (3).

201 (social sciences) reflects an under-utilization of black males with a goals of one (1).

203 (computer professionals) reflects an under-utilization of white females with a goal of forty-five (45) and black females with a goal of two (2).

204 (other professional) reflects an under-utilization of black males with a goal of one (1).

205 (medical/health related) reflects an under-utilization of black males with a goal of four (4), other minority males with a goal of ten (10), and other minority females with a goal of six (6).

209 (natural scientists) reflects an under-utilization of other minority males and other minority females with the goals of three (3) and four (4) respectively.

301 (health) reflects an under-utilization of white females with a goal of four (4).

601 (clerical support/keyboard) shows an under-utilization of white females with the goal of one hundred and eighty-eight (188).

602 (Clerical Support/Non-keyboard) reflects an under-utilization of black males and other minority females with the goals of one (1) and ten (10) respectively.

ANALYSIS OF JOB AREA ACCEPTANCE RANGE (JAAR)

The Job Area Acceptance Range (JAAR) is the acceptable range either 20 above or below internal availability for either women or minorities in a workforce sector (usually comparisons are made within the blue-collar or white-collar area). It is used to determine if a potential problem area exists. Under-utilized job groups were used to determine the JAAR within each region. Taking the number of employees in the target group and dividing that number by the total number of employees in the department calculates the under-representation figures. The Job Area Acceptance Range (JAAR) is calculated using the formula: $JAAR = A \pm (A \times .2)$. A represents the internal availability and .2 represents the acceptance range within the job area (20% variation above (+) or below (-) internal availability.)

JAAR results should be interpreted with caution since there can be legitimate reasons for placement patterns.

The calculations are as follows:

1)

- 1911 employees in DHSS
- 1312 employees are white females (W/F)

Female under-representation rate in the department: $\frac{1312}{1911} = .68$

$JAAR = (RATE) \pm (.2) (RATE)$

$JAAR = (.68) \pm (.2) (.68)$

$JAAR = .54$ through $.81$ (if the number falls between these numbers, then it shows that no potential problem area exists.)

2)

- 1911 employees in DHSS
- 182 employees are minorities

(Minorities = B/M=Black Male, O/M=Other Male, B/F=Black Female, O/F=Other Female)

Minority under-representation rate in the department: $\frac{182}{1911} = .09$

$JAAR = (.09) \pm (.2) (.09)$

$JAAR = .072$ through $.108$ (if the number falls between these numbers, then it shows that no potential problem area exists)

The following under-representation calculations are by job group and region:

Eastern Region

Job Group

- 103 = .60 (W/F)
- 104 = .75 (Minorities)
- 201 = .48 (Minorities) and .38 (W/F)
- 203 = 1.00 (Minorities)
- 204 = .22 (Minorities) and .61 (W/F)
- 205 = .21 (Minorities) and .64 (W/F)
- 209 = 1.00 (Minorities)
- 601 = .61 (Minorities) and .33 (W/F)
- 602 = .75 (Minorities) and .25 (W/F)

Southeastern Region

Job Group

- 103 = .25 (Minorities) and .50 (W/F)
- 201 = .09 (Minorities) .81 (W/F)
- 204 = .66 (W/F)
- 205 = .03 (Minorities) and .84 (W/F)
- 601 = .10 (Minorities) and .90 (W/F)
- 602 = 1.00 (W/F)

Southwestern Region

Job Group

- 103 = .80 (W/F)
- 104 = .20 (W/F)
- 201 = .72 (W/F)
- 203 = 1.00 (W/F)
- 204 = .03 (Minorities) and .57 (W/F)
- 205 = .03 (B/M) and .80 (W/F)
- 209 = .66 (W/F)
- 601 = 1.00 (W/F)
- 602 = 1.00 (W/F)

Northwestern Region

Job Group

- 103 = .14 (Minorities) and .71 (W/F)
- 104 = .75 (W/M)
- 201 = .14 (Minorities) and .68 (W/F)
- 204 = .09 (Minorities) and .59 (W/F)
- 205 = .04 (Minorities) and .84 (W/F)
- 209 = 1.00 (Minorities)
- 601 = .05 (Minorities) and .70 (W/F)
- 602 = .33 (Minorities) and .66 (W/F)

Northeastern Region

Job Group

- 103 = .11 (Minorities) and .66 (W/F)
- 104 = .75 (W/F)
- 204 = .85 (W/F)
- 205 = .94 (W/F)
- 601 = 1.00 (W/F)
- 602 = 1.00 (W/F)

Central Region

Job Group

- 101 = .11 (Minorities) and .44 (W/F)
- 102 = .80 (W/F)
- 103 = .02 (Minorities) and .61 (W/F)
- 104 = .12 (Minorities) and .59 (W/F)
- 201 = .19 (Minorities) and .73 (W/F)
- 203 = .05 (Minorities) and .35 (W/F)
- 204 = .41 (Minorities) and .57 (W/F)
- 205 = .07 (Minorities) and .79 (W/F)
- 209 = .03 (Minorities) and .81 (W/F)
- 301 = .12 (W/F)
- 601 = .07 (Minorities) and .88 (W/F)
- 602 = .03 (Minorities) and .87 (W/F)

SALARY ANALYSIS

For the first 25% grouping per employee salary

Low-- \$17,052.00

High-- \$28,044.00

Total full time employees: 538

Total males=57 Total females=481

W/M=51; B/M=06; O/M=00; W/F=425; B/F=49; O/F=07

For the second 25% grouping per employee salary

Low-- \$28,488.00

High-- \$34,572.00

Total full time employees: 442

Total males=95 Total females=347

W/M=86; B/M=07; O/M=02; W/F=319; B/F=23; O/F=05

For the third 25% grouping per employee salary

Low-- \$34,836.00

High-- \$40,716.00

Total full time employees: 466

Total males=128 Total females=338

W/M=114; B/M=10; O/M=04; W/F=311; B/F=24; O/F=03

For the fourth 25% grouping per employee salary

Low-- \$41,460.00

High-- \$111,156.00

Total full time employees: 465

Total males=178 Total females=287

W/M=166; B/M=07; O/M=05; W/F=257; B/F=20; O/F=10

GLOSSARY

AFFIRMATIVE ACTION – Result-oriented policies, programs and procedures designed to prevent discrimination and to promote employment opportunities for minorities, women, the disabled and veterans.

AFFIRMATIVE ACTION PLAN- The written plan incorporating a set of specific and results-oriented procedures to which the department commits itself to apply every good-faith effort to achieve.

AVAILABILITY – The percentage of minorities or females among those people who have the skills required for entry into a specific job group, or who are readily capable of acquiring those skills.

AVAILABILITY ANALYSIS (Two-Factor Analysis) – The process that estimates how many minorities and females are available for employment. The percentages this analysis produces are the benchmarks against which the employer's utilization of minorities and females is measured.

DEPARTMENT- For purposes of this plan, “Department” refers to the Missouri Department of Health and Senior Services.

DISABLED VETERAN – A person entitled to disability compensation for a disability of 30% or more as determined under laws administered by the Veterans Administration, or a person whose discharge or release from active duty was for a disability incurred or aggravated in the line of duty.

FACTOR – One of two types of applicant pools from which the Department of Health and Senior Services might reasonably be expected to draw employees for a job group.

FACTOR AVAILABILITY – The percentage of minorities or females among those people associated with one of two factors who have the skills required for entry into a specific job group, or who are readily capable of acquiring them.

FINAL JOB GROUP AVAILABILITIES – The sum of the weighted factor availabilities, Factors 1 and 2, for a job group. Final job group availabilities apply to a job group as a whole.

GOALS – An objective established to achieve a reasonable representation of an under-utilized sex or racial/ethnic minority in the workforce based on availability in the labor market.

JOB GROUP – One or more jobs having similar content, wage rates and opportunities.

MINORITIES – All persons classified as Black, Hispanic, Asian, Pacific Islander, American Indian or Alaskan Native.

PARITY- For purposes of this plan, the employment of women and minorities in various job groups at levels that approximate the external availability of qualified members of those groups for those particular job categories.

PERSON WITH A DISABILITY – Any person who has a physical or mental impairment which substantially limits one or more of such person's major life activities; or who has a record of such impairment; or who is regarded as having such an impairment.

PROTECTED CATEGORY – The five-race/ethnic categories are defined as follows:

Native American/Alaskan – A person having origins in any of the original peoples of North America, and who maintains cultural identifications through tribal affiliation or community recognition.

Asian or Pacific Islander – A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Island. The area includes, for example, China, Japan, Korea, Philippine Islands and Samoa.

African American (Black) – A person having origins in any of the black racial groups of Africa.

Hispanic – A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.

Caucasian (White) – A person having origins in any of the original peoples of Europe, North Africa or the Middle East.

RECRUITING AREA (Labor area) – The geographic area from which the Department of Health and Senior Services draws its workforce.

UNDER-UTILIZATION – Having fewer racial/ethnic minorities or women in a particular job category than would reasonably be expected based on their availability in the labor market.

UTILIZATION ANALYSIS – The comparison of availability to workforce composition of minorities and females for each job group. The comparison can be made using a variety of rules, such as the 80% rule, the Any Difference Rule and the 2 and 3 Standard Deviation Rule. The result indicates instances of under-utilization of minorities or females within a job group.

VALUE WEIGHT – A percentage assigned to each of the factors within a job group. These percentages express the relative amount of hiring the Department of Health and Senior Services does from each factor in staffing a specific job group.

VETERAN OF THE VIETNAM ERA – Served on active duty for a period of more than 180 days, any part of which fell in the Vietnam Era and was discharged or released with other than a dishonorable discharge.

JOB GROUPS

101 OFFICIALS AND ADMINISTRATORS

Department Director (State)
Deputy Department Director (State)
Deputy Division Director
Division Director

102 MANAGERS/ADMINISTRATORS

Dental Health Program Administrator
Human Relations Officer III
Principal Assistant Board/Commission

103 MANAGERS/SPECIALIZED TRAINING

Chief Counsel
Community Health Nurse V
Computer Information Technology Manager I
Dietician IV
Social Services Manager (Band 1)
Social Services Manager (Band 2)
Social Services Manager (Band 3)

104 OTHER MANAGERS

Assistant Health Program Administrator
Designated Principal Assistant (Department)
Designated Principal Assistant (Division)
Environmental Public Health Specialist IV
Environmental Public Health Specialist V
Environmental Specialist IV
Facilities Operations Manager (Band I)
Facilities Operations Manager (Band 2)
Facilities Operations Manager (Band 3)
Fiscal and Administrative Manager (Band 1)
Fiscal and Administrative Manager (Band 2)
Fiscal and Administrative Manager (Band 3)
Human Resources Manager (Band 2)
Investigation Manager (Band I)
Laboratory Manager (Band 1)
Laboratory Manager (Band 2)
Laboratory Manager (Band 3)
Nutrition Specialist
Program Coordinator (Mental Health) (Health)
Public Health Epidemiologist

Public Health Manager (Band 1)
Public Health Manager (Band 2)
Public Health Manager (Band 3)
Research Analyst IV
Research Manager (Band 1)
Research Manager (Band 2)
Research Manager (Band 3)

201 SOCIAL SCIENCES

Aging Program Specialist I
Aging Program Specialist II
Child Care Safety and Licensure Program Specialist
District Child Care Facility Supervisor
Home and Community Services Area Supervisor
Program Development Specialist
Social Service Worker I
Social Service Worker II

202 AUDITORS AND ACCOUNTANTS

Accountant I
Accountant II
Accountant III
Accounting Analyst I
Accounting Analyst II
Accounting Analyst III
Budget Analyst III
Senior Auditor

203 COMPUTER PROFESSIONALS

Computer Information Tech I
Computer Information Tech II
Computer Information Tech III
Computer Information Tech Specialist I
Computer Information Tech Specialist II
Computer Information Tech Specialist III
Computer Information Tech Supervisor I
Computer Information Tech Supervisor II
Geographic Information Systems Analyst
Geographic Information Systems Specialist

204 OTHER PROFESSIONALS

Child Care Facility Specialist I
Child Care Facility Specialist II
Child Care Facility Specialist III
Coordinator of Children's Programs

Emergency Management Officer IV
Environmental Public Health Specialist III
Facility Surveyor I Aging
Facility Surveyor II Aging
Facility Surveyor III Aging
Investigator I
Investigator II
Investigator III
Long-Term Care Specialist
Nutritionist I
Nutritionist II
Nutritionist III
Occupational Safety and Health Consultant I
Office Services Coordinator I
Planner II
Planner III
Public Information Administrator
Public Information Coordinator
Public Information Specialist I
Public Information Specialist II
Research Analyst I
Research Analyst II
Research Analyst III
Residential Care Facility Inspector
Special Assistant Professional
Video Production Specialist I
Video Production Specialist II

205 MEDICAL/HEALTH RELATED

Community Health Nurse I
Community Health Nurse II
Community Health Nurse III
Community Health Nurse IV
Consultant Community Health Nurse
Dentist III
Epidemiology Specialist
Facility Advisory Nurse I
Facility Advisory Nurse II
Facility Advisory Nurse III
Health Educator I
Health Educator II
Health Educator III
Health Facilities Consultant I
Health Facilities Nursing Consultant

Health Planning Specialist
Health Program Representative I
Health Program Representative II
Health Program Representative III
Medical Consultant
Registered Nurse IV
Senior Epidemiology Specialist

208 MANAGEMENT ANALYST, PERSONNEL

Administrative Analyst II
Management Analysis Specialist I
Management Analysis Specialist II
Personnel Officer I
Personnel Analyst II
Training Technician I
Training Technician II
Training Technician III

209 NATURAL SCIENTISTS

Associate Public Health Laboratory Scientist
Environmental Public Health Specialist I
Environmental Public Health Specialist II
Environmental Public Health Specialist III
Public Health Laboratory Scientist
Radiological Health Analyst
Senior Public Health Laboratory Scientist

212 NON-CERTIFIED ENGINEERS

Engineering Consultant
Environmental Engineer I
Environmental Engineer II

213 ATTORNEYS/HEARING OFFICERS

Hearings Officer
Legal Counsel

216 PURCHASING AGENTS/BUYERS

Procurement Officer I

301 HEALTH

Emergency Medical Services Inspections I
Emergency Medical Services Inspections II
Medical Laboratory Technician I
Medical Laboratory Technician II

303 OTHER TECHNICIANS

Computer Information Technician Trainee
Computer Information Technologist I
Geographic Information System Technologist I
Geographic Information System Technologist II
Office Services Assistant

501 PARAPROFESSIONALS

Executive I
Laboratory Assistant
Research Worker

601 CLERICAL SUPPORT/KEYBOARD

Data Entry Supervisor I
General Office Assistant
Office Support Assistant (Keyboard)
Office Support Assistant (Steno)
Senior Office Support Assistant (Keyboard)
Senior Office Support Assistant (Steno)
Special Assistant Office and Clerical

602 CLERICAL SUPPORT/NON-KEYBOARD

Account Clerk I
Account Clerk II
Administrative Office Support Assistant
Information Support Coordinator
Mail Room Supervisor
Office Support Assistant (Clerical)
Personnel Clerk
Photographic Machine Operator
Senior Office Support Assistant (Clerical)
Storekeeper I
Storekeeper II
Supply Manager I

802 CLEANING AND BUILDING SERVICE

Maintenance Supervisor I
Maintenance Worker II

803 TRANSPORTATION OCCUPATIONS

Motor Vehicle Driver